

AMENDMENTS TO THE CLAIMS

1. (Currently amended) A method of determining identifying whether or not that a pregnant woman is at risk of developing pre-eclampsia or whether or not that her fetus is at risk of developing intrauterine growth restriction (IUGR), which method comprises:
 - (a) measuring asymmetric dimethylarginine (ADMA) in a pregnant woman at a stage of pregnancy from 4 to 25 weeks gestation; and
 - (b) determining whether or not the ADMA is greater than 2.0 mol/L in the woman, thereby determining whether or not that the woman is at risk of developing pre-eclampsia or her fetus is at risk of developing IUGR if the level of ADMA is greater than 1.5 μmol/L in the woman.
2. (Canceled)
3. (Canceled)
4. (Previously presented) The method of claim 1, wherein the pregnant woman is at a stage of pregnancy from 10 to 25 weeks gestation.
5. (Previously presented) The method of claim 4, wherein the woman is at a stage of pregnancy from 15 to 25 weeks gestation.
6. (Currently Amended) The method of claim 1, wherein determining whether or not that the woman is at risk of developing pre-eclampsia or determining whether or not that

her fetus is at risk of developing IUGR comprises determining ~~whether or not that~~ the woman's ADMA level is at least 3 times the normal pregnancy level.

7. (Currently Amended) The method of claim 1, wherein determining ~~whether or not that~~ the woman is at risk of developing pre-eclampsia or determining ~~whether or not that~~ her fetus is at risk of developing IUGR comprises determining ~~whether or not that~~ the woman has an increase in the ADMA/symmetric dimethylarginine (ADMA/SDMA) ratio that is greater than the normal pregnancy ratio.
8. (Currently Amended) The method of claim 7, comprising determining ~~whether or not that~~ the ADMA/SDMA ratio is at least 5 times more than the normal pregnancy ratio.
9. (Previously presented) The method of claim 1, wherein the pregnant woman is suspected of being at risk of developing pre-eclampsia or her fetus is suspected of being at risk of developing IUGR.
10. (Previously presented) The method of claim 9, wherein the woman is a smoker.
11. (Previously presented) The method of claim 1, further comprising carrying out Doppler waveform analysis of the uterine arteries and/or flow-mediated dilatation of the brachial artery in the woman.
- 12.-28. (Canceled)